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CONFIRMATION NO. 4180

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
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| 10/802,966 | 03/17/2004 RULE | 015 | 3723 | 380-185 |

APPLICANTS

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**** CONTINUING DATA *******

This appn claims benefit of 60/455,317 03/17/2003

**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****
05/29/2004

| Foreign Priority claimed 35 USC 119(a-d) conditions met | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY JAPAN | SHEETS DRAWINGS 4 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 5 |
|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|------------------------------|-------------------------|-----------------------|----------------------------|
| Verified and Acknowledged _____ /THERESA T SNIDER/ Examiner's Signature | | | | | | |

ADDRESS

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TITLE

Selective bag or bagless cleaning system

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|------------------------------------|-----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE RECEIVED 1472 | FEES: Authority has been given in Paper No._____ to charge/credit DEPOSIT ACCOUNT No._____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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